

House Member Appropriation Request Form

Member: _____ Date: _____

Project/Event Name*: Iron Wolf Recovery

**Please make sure name is how you would like it listed in the budget*

Requested Amount: \$248,400

Recipient Entity: Iron Wolf Recovery Fitness

Is the final recipient a: _____ state agency, _____ local government, non-profit, or _____ other?

If "other," please explain: _____

If a non-profit, is it registered and in good standing with the Secretary of State's Office? **Yes** or **No**

If no, please explain: _____

Recipient Entity Contact: Maggie Talucci Title/Position: Executive Director

Contact Phone Number: (843) 934-7967 Email: info@ironwolfrecovery.org

Recipient Entity Website: www.ironwolfrecovery.org

Summary of Intended Use of the Funds: Iron Wolf Recovery will expand access to free group fitness classes and wellness-based community to support individuals and families in recovery from substance use disorders.

Please attach a requested project cost breakdown and any supporting materials or documents. **Are there any materials submitted with this form? Yes or No**

Justification of Request/Public Benefit: _____

To be completed by House members only

REP. Murphy
Primary Member Sponsor – Please Print

[Signature] 2/28/23
Member Sponsor Signature & Date

Additional Sponsors: _____

Amount Recommended by House Member: \$248,400